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UNCLAS SECTION 01 OF 04 YEREVAN 000208

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DEPARTMENT FOR OES, EUR/PGI AND EUR/CARC - DSTAVROPOULOS
PLEASE PASS TO USAID

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TAGS: [KFLU](#) [TBIO](#) [SENV](#) [ECON](#) [FARG](#) [PREL](#) [AM](#)
SUBJECT: AVIAN FLU UPDATE AND ACTION REQUEST

REF: A) YEREVAN 113 B) 05 YEREVAN 2053

Sensitive but unclassified. Please protect accordingly.

SUMMARY AND ACTION REQUEST

¶11. (SBU) An eleven-member Avian Influenza (AI) Interagency Team including representatives from USAID, USDA, HHS/CDC, DoD and State, traveled in Yerevan from January 24-26. The team, or elements thereof, met with the Ministers of Agriculture, Health and Education, with representatives from international organizations and visited a local hospital and local laboratories. Team members were pleased with the GOAM's openness and the fact that most government representatives appeared to recognize the serious nature of the AI threat. Subsequent to the Team's visit, teams from the World Health Organization (WHO) and World Bank visited Armenia to assess AI preparedness. A USAID-funded expert is also currently in Armenia providing training on AI testing to local veterinarians. Testing capacity in Armenia remains limited. On the human health side, the U.S. AI Team and WHO Team agreed that the local genetics lab had the capacity to test for AI in humans. The WHO Team raised serious concerns, however, about bio-security at the lab. While U.S. assistance would be helpful in all areas, the most urgent need is in the agricultural sector (see action request, para. 11). End Summary.

USG AI INTERAGENCY TEAM VISITS ARMENIA

¶12. (U) An eleven-member AI Interagency Team including representatives from USAID, USDA, HHS/CDC, DoD and State, traveled in Yerevan from January 24-26. The team, or elements thereof, met with the Ministers of Agriculture, Health and Education, with representatives from international organizations including the WHO, World Bank, FAO, UNICEF and European Commission, and visited the Nork Infectious Disease Hospital, a local private genetics testing lab, the Central Veterinary Laboratory and local poultry markets. While the team was originally scheduled to depart on the evening of January 25, their departure was delayed due to poor weather. The team members were pleased with the openness of the Government and the fact that most government representatives appeared to recognize the serious nature of the AI threat.

AGRICULTURE: MOVING FORWARD WITH RAPID TESTING

13. (SBU) The Minister of Agriculture was candid and direct with representatives from the AI Team. He cited the report produced by USAID-funded avian flu expert Dr. Elizabeth Krushinskie following her November 2005 trip to Armenia (ref B) and said that he "expected" additional technical assistance from the U.S. He welcomed the Team's offer of 1,500 sets of personal protective equipment (PPE) and was very receptive to the idea of a regional conference to discuss AI preparedness. According to the Minister, veterinarians at the Central Lab tested over 170 birds in the period from November-January, and have not identified any cases of AI. Members of the AI Team later visited the Central Veterinary Lab where lab technicians confirmed that they had received over 170 birds for testing. The lab's testing capacity is extremely limited, however, and consists primarily of non-functioning and outdated polymerase chain reaction (PCR) equipment and an ELIZA test which detects anti-bodies, but not the virus. Due to the high and very rapid mortality caused by the H5N1 virus, the Team's experts felt that the ELIZA was not the best method for diagnosing AI because it is likely that birds would die before producing anti-bodies. The Minister also detailed many of the other steps taken to combat AI in Armenia including disinfecting of vehicles at the borders, banning poultry imports from countries where AI has been identified, disinfecting through a three-level process at commercial poultry farms and banning hunting (refs). (Note: Embassy personnel traveling to Georgia found decontamination efforts the border to be inconsistent and untreated vehicles were allowed to cross. We all have heard that the ban on hunting is not being properly enforced. End note.) The Minister was open to additional international assistance and acknowledged the

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serious nature of the AI threat, saying "the risk is very high, but luckily there is no virus in Armenia."

DOD OFFERS SUPPORT TO DEVELOP A LAB

14. (SBU) The Minister of Agriculture specifically requested assistance with training on both ELIZA and PCR equipment. Team member and DoD representative Dr. Samuel Yingst said DoD would consider assisting with the development of a testing laboratory in Armenia. The Minister reacted positively to this suggestion and the Embassy is currently coordinating with DoD and the government to move this process forward.

USAID-FUNDED EXPERT TRAINS LOCAL VETS ON RAPID TESTING

15. (SBU) On January 28, avian flu expert Dr. Elizabeth Krushinskie arrived in Armenia to follow up on her November 2005 visit (ref B) and to provide training to Central Veterinary Lab employees and others on the use of rapid assay AI detection kits and corresponding protocols. Krushinskie brought some equipment including 20 testing kits, 40 sample shipment containers and PPEs with her for use in her training sessions. Krushinskie conducted training seminars with local veterinarians in areas near the Armenian border with Turkey and with veterinarians and lab technicians in Yerevan. While the sessions have been productive, additional training and supplies as well as continued political encouragement will likely be needed to develop a fully functioning active surveillance program. The World Bank recently announced a USD 4 million loan program to assist the government with its efforts to combat AI and indicated a willingness to encourage the GOAM to use a portion of said funds, or funds redirected from other World Bank projects, to purchase additional testing kits.

ADDITIONAL TRAINING, SUPPLIES FOR HEALTH CARE WORKERS

¶16. (SBU) Representatives from the AI Team had a productive meeting with the Minister of Health. The Minister noted that the National Assembly recently approved the Armenian National Response Plan. He emphasized that the Ministry is coordinating closely with the Ministry of Agriculture, particularly as both Ministries sit on the GOAM's Inter-Ministerial AI Committee. He welcomed the offer of PPEs and was supportive of the idea of a regional conference.

The Minister said that the Ministry of Health was still developing a case definition for AI, but had adopted the WHO's model for responding to any possible outbreak. According to the Minister, the priorities of the Ministry include maximizing the availability of information to the public, containing AI in animals and isolating and treating with Tamiflu any potential human AI cases. In subsequent meetings, the First Deputy Minister of Health requested U.S. assistance in improving Armenia's human health laboratory testing capacity. The Team also visited the Nork Infectious Disease Hospital. The Nork Hospital has been identified as the country's referral hospital for suspected human H5N1 cases and has 15 separate isolation rooms and three ventilators in its intensive care unit. The team identified a need for additional training and supplies for health care workers at the hospital and in Armenia generally. The laboratory facilities at the Nork Hospital are extremely poor and diagnostic testing for human cases would be done at the Center for Medical Genetics (the Center).

EXPERTS DISAGREE ON HUMAN TESTING CAPACITY

¶17. (SBU) Although, the Team members who visited the Center for Medical Genetics (the Center) were impressed, and according to the Team's assessment, the Center had "good laboratory capacity to identify H5 in specimens by real-time PCR," members of the WHO-sponsored team, who were in Armenia from January 28 to February 5, were concerned that the Center did not meet the necessary bio-safety standards to test for AI. According to the WHO team, the Center lacked the necessary equipment to protect the laboratory technicians, the ventilation hood as it was being used was inadequate to

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prevent the virus from spreading throughout the lab and the ventilation system in general lacked sufficient safeguards to ensure that exhaust released outside the lab would be free of live virus. The WHO Team was sufficiently concerned about the bio-safety standards at the Center that they told us they would likely advise the GOAM not to conduct diagnostic testing at the site. The WHO Team members also noted that the Center for Medical Genetics and the Central Veterinary Lab are both located in highly populated areas and in both locations there is a single entrance for staff, the general public and potentially infected samples. The WHO Team is drafting a final report from their visit which we hope to have early next week. When we have the report, we will provide additional information about their assessment (septel).

PROGRESS ON EDUCATION AND COMMUNICATIONS

¶18. (SBU) Representatives from the AI Team met with the Minister of Education and discussed public outreach efforts with a number of international organizations and USAID implementing partners. The Minister of Education has not been well integrated into the AI prevention effort and the AI Team heard conflicting accounts of whether or not the Ministry of Education sits on the Inter-Ministerial AI Committee. The Minister, however, was clearly interested in engaging on the AI issue. UNICEF has capitalized on the

momentum built by the Team's visit. UNICEF designed a leaflet aimed at teaching children (and adults) who own chickens about protecting flocks, responding to bird die-offs and basic hygiene. UNICEF has printed 50,000 of these leaflets and given them to the Inter-Ministerial AI Committee for distribution. UNICEF plans to print an additional 250,000 copies of the leaflet by February 20. UNICEF has also designed and is printing 1,000 copies of a poster for use in public schools and developed a series of in-class exercises about AI for teachers to use with students. Public schools in Armenia are closed because of the cold weather, but UNICEF expects to have these materials in place when classes resume on February 15. These educational materials were approved by the Ministry of Health which has requested that other donors use these materials in their public health outreach. All of UNICEF's activities have been carried out in conjunction with the National Institute of Education, an affiliate of the Ministry of Education.

CLOSE COORDINATION WITH THE INTERNATIONAL COMMUNITY

¶9. (SBU) We continue to coordinate closely with other international donors and the GOAM on the AI issue. Over the past week, representatives from the Embassy and USAID have met with visiting teams from the WHO and World Bank. We are in almost daily contact with local representatives from these and other donor organizations. We are also in the midst of Krushinskie's two-week training mission which is being very well received. The Ambassador regularly raises avian flu in his meetings with government representatives and the USG AI Team's visit was widely (and positively) covered in the press (ref A).

COMMENT

¶10. (SBU) The U.S. AI Team's visit marked the start of a flurry of activity on the AI issue, including visits by assessment teams from the World Bank and WHO and a two-week training program by USAID-funded AI expert Krushinskie. While the GOAM has been extremely open and cooperative with all of these teams, they are clearly hoping for more concrete assistance in the near future. The AI Team's generous donation of 1,500 sets of PPE and Krushinskie's training sessions are the type of direct support the GOAM needs. The differing opinions of some of the visiting experts also complicate the situation. The U.S. AI Team and the WHO Team agreed that the Center for Medical Genetics laboratory had the capacity to test human samples for H5 using real-time PCR. The WHO Team, however, was sufficiently concerned about the bio-safety standards at the Center that they told us they would likely advise the GOAM not to conduct diagnostic testing there. Further assessment is needed concerning human

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testing capacity and appropriate support for the Center for Medical Genetics.

ACTION REQUEST

¶11. (SBU) The WHO and UNICEF have taken active leadership roles in the areas of health and communications respectively. The U.S. should support these efforts, both financially and through on-the-ground coordination. Per the AI Team's health related recommendations, the U.S. should also consider technical assistance for human surveillance, acquiring additional PPEs, infection control education, health care worker education, and clinical management training. We would also welcome support in line with the AI Team's recommendations concerning communications. U.S. assistance is particularly critical, however, in the agricultural

sector. DoD's longer-term proposal to improve Armenia's testing laboratories is welcome and responds to a serious shortfall in diagnostic capacity, but immediate support is also required. Therefore, we request funding for a long-term (one year minimum) agricultural expert to develop and implement a comprehensive agricultural active surveillance system, a six-month supply of rapid assay testing kits and laboratory supplies, shipping supplies so that suspect cases can be sent to an overseas reference laboratory and PPEs, plastic bags, disinfectant and other equipment sufficient to support wide-spread culling and disposal if necessary.

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